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FILED

12 JUN -8 PM 3:28

CLERK U.S. DISTRICT COURT
SOUTHERN DISTRICT OF CALIFORNIA

UNITED STATES DISTRICT COURT

VIA FAX

FOR THE SOUTHERN DISTRICT OF CALIFORNIA

IN RE FERRERO LITIGATION)

Case No. 11-cv-205 H (CAB)
OBJECTION TO CLASS ACTION
SETTLEMENT AND

My name is Michael Hale and I am a class member. I do not intend on appearing at the fairness hearing or submitting evidence of any kind there or asking questions of any witnesses. I request that this objection be submitted at the hearing for consideration by the Court. I rely on the documents attached to this objection, as well as all document in the Court's file.

I would ask that the Court reject this settlement and the proposed award of attorneys' fees and expenses.


My objections to the settlement are as follows:

Objection is also made that the requirements of Fed. R. Civ. P. 23 cannot be met to maintain this case as a class action. The different groups and claims are too disparate and involve too many individualized issues to be maintained as a class.

The defendant has already agreed to nationwide practice changes outside of California. Not only is it unthinkable that the defendant would implement materially different practice changes in California, the practice changes are illusory and in the defendants best interest.

Please reject the settlement and under all circumstances please do not approve the attorneys' fees and expenses. Thank you for your attention to this matter.

Date: June 8, 2012


Michael E. Hale, Pro Se

CERTIFICATE OF SERVICE

I certify that a true and correct copy of this document has been forward to all those list as indicated below on this the 8th day of June 2012.

Via U.S. Mail

Ronald A. Marron

Law Offices of Ronald A. Marron, APLC

3636 4th Avenue, Ste. 202

San Diego, CA 92103

Via U.S. Mail

Gregory S. Weston

Jack Fitzgerald

The Weston Firm

1405 Morena Blvd., Ste. 201

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Via U.S. Mail

Keith E. Eggleston

Colleen Bal

Dale R. Eggleston

Colleen Bal

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650 Page Mill Rd.

Palo Alto, CA 94304-1050


Clerk of the Court

U.S. District Court for the Southern

District of California

880 Front Street, Ste. 4290

San Diego, CA 92101-8900


Michael E. Hale, Pro Se

**In re Ferrero Litigation
CLAIM FORM**

VIA FAX

Please print or type
I, MICHAEL HALE, state as follows:

LAST NAME (Claimant)*

HALE

FIRST NAME (Claimant)*

MICHAEL

Current Address*

107 SPRUCE

Current City*

FAIRFAX

State*

CA

Zip Code*

94930 -

Telephone Number (Day)(optional)

415 - 400 - 7002

Telephone Number (Night)(optional)

 - -

E-mail Address*

MIKERED7904@HOTMAIL.COM

IDENTITY OF CLAIMANT (Check appropriate box)

- ☒ Individual ☐ Legal Representative (attach information showing authority to submit claim)
☐ Other (specify, describe on separate sheet)

Please state the number of jars of Nutella that you purchased
in California from August 1, 2009 to January 23, 2012, inclusive.

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NOTE: YOU CAN CLAIM UP TO A MAXIMUM OF FIVE (5) JARS

CERTIFICATION*

I have read and am familiar with the contents of the Instructions accompanying this Claim Form and I certify that the information I have set forth in the foregoing Claim Form and in documents attached by me are true, correct and complete to the best of my knowledge.

I certify that I purchased the number of jars of Nutella in the State of California indicated on the Claim Form above during the period August 1, 2009 to January 23, 2012, inclusive.

I am not an officer, director, agent, servant or employee of Ferrero U.S.A., Inc. or any related entity thereof; a judge in this lawsuit; or an immediate family member of such persons; *and* I have not requested exclusion from the Settlement.

I certify that the foregoing information supplied by the undersigned is true and correct to the best of my knowledge and that this Claim Form was executed this 8 day of JUNE, 2012.

Mik Hale

Signature

MICHAEL HALE

Type/Print Name

6-8-12

Date

If the Claimant is other than an individual, or is not the person completing this form, the following must also be provided:

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Name of person signing

Capacity of person signing

Date

(Executor, President, Trustee, etc.)

REMINDER CHECKLIST:

1. Please sign the above Claim Form.
2. Keep a copy of your Claim Form and supporting documentation for your records.
3. If you desire an acknowledgment of receipt of your Claim Form, please complete the on-line Claim Form or mail this Claim Form via Certified Mail, Return Receipt Requested.
4. If you move or your name changes, please send your new address, new name or contact information to the Claims Administrator via the Settlement Website, or First-Class U.S. Mail, each listed in the Notice.